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POWER OF ATTORNEY OR REVOCATION OF POWER OF ATTORNEY WITH A NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS	Application Number		09/701,014-Conf #4760	
	Filing Date		11-22-2000	
	First Named Inventor		Kyriacos A. Mitrphanous	
	Title	RETROVIRAL DELIVERY SYSTEM		
	Art Unit	1636		
	Examiner Name	GUZO, DAVID		
	Attorney Docket No.		2204437.124 US1	

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.
 OR
☒ I hereby appoint Practitioner(s) associated with the following Customer Number as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith:

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OR

☐ I hereby appoint Practitioner(s) named below as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith:

Practitioner(s) Name	Registration Number	Practitioner(s) Name	Registration Number

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I am the:

☐ Applicant/Inventor.
 OR
☒ Assignee of record of the entire interest. See 37 CFR 3.71.
 Statement under 37 CFR 3.73(b) (Form PTO/SB/96) submitted herewith or filed on _____

SIGNATURE of Applicant or Assignee of Record			
Signature	<i>Peter Nola</i>	Date	22 OCTOBER 2010
Name	PETER NOLA	Telephone	(440) 1865723000
Title and Company	EXEC DIRECTOR, ID SIP COMMERCIAL DEVELOPMENT		

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*. OXORD BIOEDICA (UK) LIMITED

☐ *Total of 1 forms are submitted.